

**VISOKA ZDRAVSTVENA ŠOLA V CELJU**

**MAGISTRSKO DELO**

**OCENA BOLEČINE PRI DEMENTNIH BOLNIKI**

**ASSESSMENT OF PAIN IN DEMENTIA PATIENTS**

**Študentka: MARCELA ZABRET**

**Mentorica: doc. dr. NEVENKA KRČEVSKI ŠKVARČ, dr. med.**

**Študijski program: MAGISTRSKI ŠTUDIJSKI PROGRAM**

**PALIATIVNA OSKRBA**

**CELJE, 2022**

## POVZETEK

**Uvod:** Bolniki z demenco se težko ali pa se niso sposobni sporazumevati z okolico zaradi kognitivnega upada. Zato imajo omejitve pri izražanju bolečine. Z raziskavo smo želeli ugotoviti, koliko zdravstveni delavci vedo o demenci ter kako prepoznajo in ocenjujejo bolečino pri bolnikih z demenco.

**Metoda:** Raziskava je temeljila na kvantitativnem raziskovalnem pristopu. Podatki so bili zbrani s tehniko anketiranja. Uporabili smo nenaključni kvotni vzorec. V raziskavi je sodelovalo 275 zdravstvenih delavcev iz 10 socialnovarstvenih zavodov celjske regije, ki se pri svojem delu srečujejo z bolniki z demenco. Zbrani podatki so bili obdelani s statističnim programom SPSS 25.0.

**Rezultati:** V raziskavi smo ugotovili, da zdravstveni delavci svoje znanje o demenci ocenjujejo kot dobro v 44,7 % (123). Glede na starost ne obstajajo statistično pomembne razlike glede znanja o demenci ( $p = 0,850$ ), prav tako ne obstajajo statistično pomembne razlike glede na izobrazbo zaposlenih in njihovega mnenja o demenci ( $p = 0,718$ ). 172 anketiranih (62,5 %) meni, da je bolečina pri bolnikih z demenco pogosto neprepoznana in nezdravljena. Anketiranci se s povprečno oceno 4,26 strinjajo, da se bolečina pri bolnikih z demenco pogosto izraža kot spremenjeno vedenje ( $SO = 0,81$ ;  $P = 0,000$ ). Anketiranci se s povprečno oceno 3,30 strinjajo ( $SO = 1,07$ ;  $p = 0,000$ ), da je samoocena bolnika z demenco najbolj zanesljiva metoda ocenjevanja bolečine. Zdravstveni delavci bolečino pri bolnikih z demenco le občasno ocenjujejo z lestvicami opazovanja in številčnimi lestvicami ( $PV = 2,46$ ;  $SO = 1,450$ ;  $p = 0,000$ ).

**Razprava:** Naša raziskava pokaže, da zdravstveni delavci svoje znanje o demenci ocenjujejo kot dobro, vendar je bolečina pri bolnikih z demenco še vedno pogosto neprepoznana in nezdravljena, čeprav spremenjeno vedenje bolnikov z demenco pogosto povezujejo z bolečino. Samoocena bolnika z demenco o bolečini je za zdravstvene delavce najbolj zanesljiva metoda ocene bolečine.

**Originalnost:** Rezultati raziskave kažejo, da imajo zdravstveni delavci znanje o demenci in prepoznajo znake, ki kažejo na prisotnost bolečine, vendar premalo uporabljajo orodja za oceno bolečine.

**Omejitve/nadaljnje raziskovanje:** Omejitev raziskave je v izbrani metodologiji in izbranem vzorcu. Nadaljnje raziskave bi bilo smiselno usmeriti v spremljanje in oceno bolečine pri bolnikih z demenco ter v uvedbo enotnih standardiziranih orodij za oceno bolečine v socialnovarstvenih zavodih.

**Ključne besede:** ocena bolečine, demenca, kognitivni upad, institucionalno varstvo

## SUMMARY

**Introduction:** Dementia patients find it hard or even impossible to communicate with people around them because of cognitive decline. They thus have difficulties in expressing pain. In our study we wanted to determine how much health workers knew about dementia and how they recognised and assessed pain in dementia patients.

**Methods:** In the study we used a quantitative research approach. The data were collected through a survey. A non-random (quota) sample was used. Two hundred seventy-five health workers working with dementia patients from 10 social welfare institutions in the Celje region participated in the survey. The collected data were analysed using SPSS 25.0.

**Results:** In the survey we found that 44.7% (123) of health workers rated their knowledge of dementia as "good". No age-based statistically significant differences in knowledge about dementia were observed ( $p = 0.850$ ). Furthermore, no statistically significant differences between employee education and their opinions on dementia were found ( $p = 0.718$ ). One hundred seventy-two respondents (62.5%) believed that pain in dementia patients was often unrecognised and left untreated. Respondents agreed with average mark 4,6 that pain in dementia patients is often manifested as behavioural disturbances, i.e. agitation (SO = 0.81;  $p = 0.000$ ). In addition, the respondents agreed with average mark 3,30 that self-assessment of dementia patients was the most reliable method of pain assessment (SO = 1.07;  $P = 0.000$ ). Health workers only occasionally used observation scales and numeric rating scales to assess pain in dementia patients (on average mark 2.46; SO = 1.450;  $p = 0.000$ ).

**Discussion:** Our survey showed that health workers considered their dementia knowledge to be good, but that pain in dementia patients was still often unrecognised and untreated, even though behavioural disturbances in dementia patients were commonly associated with pain. Self-assessment of pain in dementia patients was considered the most reliable method of pain assessment by health workers.

**Originality:** The study results found that health workers had knowledge of dementia and recognised signs that indicated the presence of pain. However, they made insufficient use of pain assessment tools.

**Limitations and Further Research:** The study's limitations lie in the methods chosen and its sample size. Further research should focus on monitoring and assessing pain in dementia patients and introducing uniform, standardised pain assessment tools in social welfare institutions.

**Keywords:** pain assessment, dementia, cognitive decline, institutional care